

Pay Statement History Details



Shriners Hospitals
(or Children)

SHC PHILADELPHIA
Ms SHARON F WILLIAMS
1706 SCATTERGOOD STREET
PHILADELPHIA, PA 19124

Payment Details

Payment Number: 99002150
Payment Date: 12-05-2019

Period Begin Date: 11-17-2019
Period End Date: 11-30-2019

Earnings

Description	Hours	Rate	From Date	To Date	Current	Year to Date
REGULAR PAY	56.00	19.5775			1,096.34	33,105.55
OVERTIME PAY					2.76	33.12
GTL IMPUTED INC					469.86	6,049.44
PAID TIME OFF	24.00	19.5775				\$1,568.96
TOTAL PAY						\$39,202.79

Deductions

Description	Current	Year to Date
GTL IMPUTED INC	2.76	33.12
*TRADITION DENT	7.52	186.00
*VISION	4.11	102.75
*HMO	66.15	1,653.75
ADDITIONAL AD&D	1.15	28.75
EE OPTIONAL LIFE	4.78	119.50
CHILD OPT LIFE	1.94	48.50
MEALS	73.63	1,315.31
SHC DONATION	1.00	25.00
Net Pay	\$1,049.82	\$26,769.18

Taxes

Description	Current	Year to Date
FICA-OASDI	92.45	2,320.01
FICA-CASTD	134.56	3,361.47
FEDERAL W/H TAX (S-01)	21.63	540.25
FICA-HI	45.78	1,143.79
PA (S-01)	60.74	1,519.89
PHILADELPHIA CI	0.94	23.52
PA-Other		

Accrual Balances

Accrual Type	Accrual Amount
PAID TIME OFF	148.28
EXT ILL BANK	204.88

Pay Statement History Details



Structure: **Nonprofit**
for Children

SHC PHILADELPHIA
1706 SCATTERGOOD STREET
MC SHAMON P WILLIAMS
PHILADELPHIA, PA 19124

Payment Details

Payment Number: 09002085
Payment Date: 12-19-2019

Period Begins Date: 12-01-2019
Period End Date: 12-14-2019

2900 ROCKY POINT DRIVE
TAMPA FL 33607
813-281-0300

Employee ID: [REDACTED]
Base Salary/Rate: \$15.5775
Pay Type: Hourly

Earnings

Description	Hours	Rate	From Date	To Date	Current	Year to Date
REGULAR PAY	56.50	19.5775			1,106.13	34,211.68
CURRENT PAY	0.50	29.3662			14.68	29.36
GTL IMPUTED INC						33.12
WKND DAY PREM	17.00				450.28	6,499.72
PAID TIME OFF	23.00	19.5775			\$1,571.09	\$40,773.88
TOTAL PAY						

Taxes

Description	Current	Year to Date
FICA-QASDI	92.59	2,402.60
FEDERAL W/H TAX (S-01)	134.81	3,496.28
FICA-HI	21.65	561.90
PA (S-01)	45.84	1,189.63
PHILADELPHIA CI	60.82	1,580.71
PA-Other	0.94	24.46

Deductions

Description	Current	Year to Date
GTL IMPUTED INC	7.52	195.52
*TRADITION DENT	4.11	106.86
*VISION	65.15	1,719.90
*HMO	1.15	29.90
ADDITIONAL ADSD	4.78	124.28
BE OPTIONL LIFE	1.94	50.44
CHILD OPT LIFE	42.18	1,357.49
MEALS	1.00	26.00
SHC DONATION		
Net Pay	\$1,085.61	\$27,874.79

Accrual Balances

Accrual Type	Accrual Amount
PAID TIME OFF	134.59
EXT ILL BANK	206.72

Pay Statement History Details



St. Vincent's Hospital
for Children
SHC PHILADELPHIA
1706 SCATTERGOOD STREET
PHILADELPHIA, PA 19124

2900 ROCKY POINT DRIVE
TAMPA FL 33607
813-281-0300

Payment Details

Payment Number: 99002053
Payment Date: 01-01-2020

Period Begin Date: 12-15-2019
Period End Date: 12-28-2019

Earnings

Description	Hours	Rate	From Date	To Date	Current	Year to Date
REGULAR PAY	77.25	20.0700			1,550.41	
GTL IMPUTED INC					5.16	
HOLIDAY PREMIUM	8.75	10.0150			87.61	
PAID TIME OFF	2.75	20.0700			55.19	
TOTAL PAY					\$1,698.57	\$1,698.57

Deductions

Description	Current	Year to Date
GTL IMPUTED INC	5.16	
*TRADITION DENT	8.42	
*VISION	4.11	
*HMO	66.15	
ADDITIONAL ADD	1.15	
FE OPTIONAL LIFE	4.78	
CHILD OPT LIFE	1.94	
MEALS	79.06	
SHC DONATION	1.00	
Net Pay	\$1,136.96	\$1,136.96

Taxes

Description	Current	Year to Date
FICA-OASDI	100.43	
FEDERAL W/H TAX (S-01)	149.41	
FICA-HI	23.49	
PA (S-01)	49.73	
PHILADELPHIA CI	65.76	
PA-Other	1.02	

Accrual Balances

Accrual Type	Accrual Amount
PAID TIME OFF	143.22
EXT TLL BANK	208.57

Pay Statement History Details



**St. Joseph's Hospital
for Children**
SHC PHILADELPHIA
1706 SCATTERGOOD STREET
PHILADELPHIA, PA 19124

Payment Details

Payment Number: 99002048
Payment Date: 01-15-2020

Earnings

Description	Hours	Rate	From Date	To Date	Current	Year to Date
REGULAR PAY	64.00	20.0700			1,284.48	2,834.89
GTL IMPUTED INC						5.16
HOLIDAY PREMIUM						87.81
PAID TIME OFF	16.00	20.0700			321.12	376.31
TOTAL PAY					\$1,605.60	\$3,304.17

Taxes

Description	Current	Year to Date
FICA-CASTD	94.67	195.10
FEDERAL W/H TAX (S-01)	138.25	287.66
FICA-MI	22.14	45.63
PA (S-01)	46.88	96.61
PHILADELPHIA CI	62.16	127.92
PA-Other	0.95	1.98

Deductions

Description	Current	Year to Date
GTL IMPUTED INC		5.16
*TRADITION DENT	8.42	16.84
*VISION	4.11	8.22
*HMO	66.15	132.30
ADDITIONAL ADDD	1.15	2.30
EE OPTIONAL LIFE	4.78	9.56
CHILD OPT LIFE	1.94	3.88
MEALS	41.43	120.49
SHC DONATION	1.00	2.00
Net Pay	\$1,111.56	\$2,248.52

Accrual Balances

Accrual Type	Accrual Amount
PAID TIME OFF	138.6
EXT LIL BANK	218.42

Pay Statement History Details



St. Ann's Hospital
for Children
510 PHILADELPHIA
MS SHARON F WILLIAMS
1706 SCATTERGOOD STREET
PHILADELPHIA, PA 19124

Payment Details

Payment Number: 99002033
Payment Date: 01-30-2020

Earnings

Period Begin Date: 01-12-2020
Period End Date: 01-25-2020

Employee ID: [REDACTED]
Pay Type: Hourly
Base Salary/Rate: 20.0700

2900 ROCKY POINT DRIVE
TAMPA FL 33607
813-281-0300

Description	Hours	Rate	From Date	To Date	Current	Year to Date
REGULAR PAY	79.50	20.0700			1,595.57	4,430.46
OVERTIME PAY	0.25	30.1050			7.53	7.53
GTL IMPUTED INC						5.16
WK/DAY PREM	15.75					
HOLIDAY PREMIUM						87.81
PAID TIME OFF	0.50	20.0700			10.04	386.35
TOTAL PAY					\$1,613.14	\$4,917.31

Taxes

Deductions

Description	Current	Year to Date
FICA-OSDI	95.14	290.24
FEDERAL W/H TAX (S-01)	139.15	426.81
FICA-ME	22.25	67.88
PA (S-01)	47.11	143.72
PHILADELPHIA CI	62.45	190.37
PA-Other	0.97	2.95

Description	Current	Year to Date
GTL IMPUTED INC		5.16
*TRADITION DENT	8.42	25.26
*VISION	4.11	12.33
*HMO	66.15	198.45
ADDITIONAL ADD	1.15	3.45
EE OPTIONAL LIFE	4.78	14.34
CHILD OPT LIFE	1.94	5.82
MEALS	52.28	172.77
SHC DONATION	1.00	3.00

Net Pay \$1,106.24 \$3,354.76

Accrual Balances

Accrual Type	Accrual Amount
PAID TIME OFF	149.52
EXT ILL BANK	212.27

Pay Statement History Details



Stutter's Hospital
for Children
SHC PHILADELPHIA
1706 SCATTERGOOD STREET
PHILADELPHIA, PA 19134

2900 ROCKY POINT DRIVE
TAMPA FL 33607
813-281-0300

Payment Details

Payment Number: 99002175
Payment Date: 02-13-2020

Earnings

Description	Hours	Rate	From Date	To Date	Current	Year to Date
REGULAR PAY	40.00	20.0700			802.80	5,233.26
OVERTIME PAY						7.53
GTL IMPUTED INC					5.59	10.75
HOLIDAY PREMIUM						87.81
PAID TIME OFF	40.00	20.0700			802.80	1,189.15
TOTAL PAY					\$1,611.19	\$6,528.50

Deductions

Description	Current	Year to Date
GTL IMPUTED INC	5.59	10.75
*TRADITION DENT	8.42	33.68
*VISION	4.11	16.44
*HMO	66.15	264.60
ADDITIONAL AD&D	1.15	4.60
EE OPTION - LIFE	4.78	19.12
CHILD OPT LIFE	1.94	7.75
MEALS	29.78	202.55
SHC DONATION	1.00	4.00
Net Pay	\$1,121.73	\$4,478.49

Accrual Balances

Accrual Type	Accrual Amount
PAID TIME OFF	120.9
EXT JIL BANK	214.12